POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		21	1/26/01
FORMALITY REVIEW	SS	J087	02-09-01
RESPONSE FORMALITY REVIEW	Rm	981	06-14-01

INDEX OF CLAIMS

.... Rejected	N .... Non-elected
.... Allowed	I .... Interference
(Through numeral)... Canceled	A .... Appeal
.... Restricted	O .... Objected

Claim Final	Original	Date 6/27/02	4/4/02	7/24/03				Claim Final	Original	Date								Claim Final	Original	Date							
	①| √	√	√					51											101							
	2	√	√	√					52											102							
	③| √	√	√					53											103							
	4	O		√					54											104							
	5			√					55											105							
	6		√	√					56											106							
	7	√	√	√					57											107							
	8	√		√					58											108							
	9	O	√	√					59											109							
	10		√	√					60											110							
	11	√	√	√					61											111							
	⑫|	√	√					62											112							
	13			√					63											113							
	14			√					64											114							
	15			√					65											115							
	16			√					66											116							
	17			√					67											117							
	18			√					68											118							
	19			√					69											119							
	20			√					70											120							
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	46								96											146							
	47								97											147							
	48								98											148							
	49								99											149							
	50								100											150							

If more than 150 claims or 10 actions
staple additional sheet here

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